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Bib Data Sheet

CONFIRMATION NO. 6469

SERIAL NUMBER 10/695,155	FILING OR 371(c) DATE 10/27/2003 RULE	CLASS 424	GROUP ART UNIT 1645	ATTORNEY DOCKET NO. 51326-00004 (14376-218)
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APPLICANTS

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**** CONTINUING DATA *******

This application is a CIP of 08/786,533 01/21/1997 ABN which is a CIP of 08/652,842 05/23/1996 ABN and is a CIP of 08/568,357 12/06/1996 ABN *
 which is a CIP of 08/551,149 10/31/1995 ABN
 which is a CIP of 08/447,398 05/23/1995 PAT 6,761,894
 which is a CIP of 08/289,667 08/12/1994 ABN
 which is a CIP of 08/156,358 11/23/1993 PAT 6,752,993
 This application 10/695,155
 is a CIP of 08/545,926 10/20/1995 ABN
 which is a CIP of 08/447,398 05/23/1995 PAT 6,761,894
 which is a CIP of 08/289,667 08/12/1994 ABN
 which is a CIP of 08/156,358 11/23/1993 PAT 6,752,993
 (*)Data provided by applicant is not consistent with PTO records.

**** FOREIGN APPLICATIONS *********IF REQUIRED, FOREIGN FILING LICENSE GRANTED**

** 02/05/2004

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY CA	SHEETS DRAWING 25	TOTAL CLAIMS 28	INDEPENDENT CLAIMS 7
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

ADDRESS

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TITLE

Abundant extracellular products and methods for their production and use

FILING FEE RECEIVED 1258	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____
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